

Practitioner's Docket No. RAR112.03

RECEIVED
CENTRAL FAX CENTER**APR 09 2008****PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: John J. Kochevar

Serial No.: 10/792,044

Filed: 03/02/2004

For: Vacuum Line Sanitization Device and Method

Group No.: 1744

Examiner: Joyner, Kevin

Mail Stop RCE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

REQUEST FOR CONTINUED EXAMINATION (RCE)
(37 C.F.R. 1.114)

1. Applicant hereby requests continued examination, in accordance with 37 C.F.R. Section 1.114, for the above identified application.

TIME REQUEST IS BEING MADE

2. This request is being submitted:

Prior to payment of issue fee.

STATUS

3. Applicant is a small entity. A small entity statement was previously filed.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))**FACSIMILE**

I hereby certify that this correspondence is, on the date shown below, being transmitted by facsimile to the Patent and Trademark Office, facsimile # (571) 273-8300.

Date: 4/9/2008

Signature



Phone No. (559) 447-1837)

Richard A. Ryan, Reg. No. 39,014
(type or print name of person certifying)**EXTENSION OF TIME**

4. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)(1)-(4)) for three (3) months:

Fee: \$525.00

ENCLOSURES

5. Enclosed herewith are:

- a) An amendment
- b) Credit Card Payment Form

FEE FOR REQUEST (37 C.F.R. Section 1.17(e)).

6. This application is on behalf of:

A small entity - Continued Prosecution Request Fee: \$405.00

FEE FOR CLAIMS

7. The fee for claims (37 C.F.R. Section 1.16(b)-(d)) has been calculated as shown below:

| | (Col.1) | | (Col. 2) | | (Col. 3) | | SMALL ENTITY |
|--|---|-------|---------------------------------------|------------------|-----------|---------------------|--------------|
| | Claims Remaining After Amendment | | Highest No. Previously Paid For | Present Extra | Rate | Addit. Fee | |
| Total | 20 | Minus | 20 | = 0 | x \$25 = | \$0 | |
| Indep. | 3 | Minus | 3 | = 0 | x \$100 = | \$0 | |
| First Presentation of Multiple Dependent Claim | | | | | | + \$180 = | \$0 |
| | | | | | | Total Addit. Fee | \$0 |

No additional fee for claims is required.

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TOTAL FEE(S) DUE

8. The total fee(s) due is/are:

| | |
|--|----------|
| Extension of time for response | \$525.00 |
| Continued Prosecution Fee (Section 1.17(e)) | \$405.00 |
| Fee(s) for additional claims (Section 1.16(b)-(d)) | \$ 0.00 |

Total Fee(s) Due: \$930.00

PAYMENT OF FEE(S) DUE

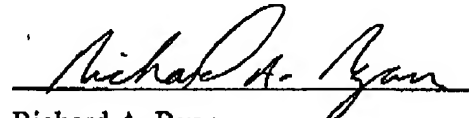
9. Please pay the fee(s) for this continued examination application as follows:

PTO Credit Card Payment Form in the amount of \$930.00.

INVENTORSHIP

10. This application as amended names as inventors the same inventors as previously designated for the claims.

Date:

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02 FC:2253

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01 FC:2801

405.00 0P

Appl. No. 10/792,044

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